

PART B - FEE(S) TRANSMITTAL

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Konstantinos Andrikopoulos, J.D., Ph.D. Transkaryotic Therapies, Inc. 700 Main Street Cambridge, MA 02139

07/05/2006 FFANAEI1 00000019 08465596

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
08/465,596	06/05/1995	RICHARD F. SELDEN	9515	2132

TITLE OF INVENTION: TRANSKARYOTIC IMPLANTATION

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APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400)	\$0	\$1400	07/11/2006		
EXAMINER		ART UNIT		CLASS-SUBCLASS				
CROUCH, DEBORAH		1632		424-093210	•			
1. Change of correspondence address or indication of "Fee Address" (37			2. For printing on the patent front page, list (1) the pages of up to 3 reciptored extent attempts 1 Wolf, Greenfield					
CFR 1.363). Change of correspondence address (or Change of Correspond Address form PTO/SB/122) attached.		Correspondence	or agents OR, alternatively,					
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required.		ntion form of a Customer	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Shire Human Genetic Therapies, Inc. Cambridge, MA Please check the appropriate assignee category or categories (will not be printed on the patent):								
4a. The following fee(s) are	enclosed:	4b	. Payment of	Fee(s):				
Issue Fee	chelosca.	70		in the amount of the fee(s) is end	closed.			
Publication Fee (No small entity discount permitted)		:d) .	Payment by credit card. Form PTO-2038 is attached.					
Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23/2825 (enclose an extra copy of this form).					
5. Change in Entity Status	(from status indicated above)				<u> </u>		
	MALL ENTITY status. See			ant is no longer claiming SMAL		W/ /		
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.								
Authorized Signature	nicaso		_	Date	Juno 30,	200Ce		
Typed or printed name _		• • • • • • • • • • • • • • • • • • • •	, ,	Registration N				
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.								

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Docket No.: T0541.70000US06

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Richard F Selden

Serial No.:

08/465596

Confirmation No.:

2132

Filed:

June 5, 1995

For:

TRANSKARYOTIC IMPLANTATION

Examiner:

D. Crouch

Art Unit:

1632

Certificate of Mailing Under 37 CFR 1.8(a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: June 30, 2006

TRANSMITTAL LETTER

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

1. Part B – Issue Fee Transmittal

Our check in the amount of \$1400.00 covering the required issue fee is enclosed. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 23/2825, under Docket No. T0541.70000US06. A duplicate copy of this paper is enclosed.

Dated: June 30, 2006

Respectfully submitted,

Michael T. Siekman

Registration No.: 36,276

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